

Complications of implant-supported restorations in total edentulism: 10 years follow-up

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Background: Long term results represent an essential index of any treatment efficiency. During a long term period the implant-prosthetic treatment is reflected by: success and survival rates, frequency of failures and complications – categories accepted by the community implantologists. The success of implant supported restorations depends on the peri-implant bone as well as prosthesis conditions, which are in fact the final treatment objective.

Aim/Hypothesis: The analysis at 10 years follow-up of the complications occurred after rehabilitation of patients with total edentulism using implant restorations.

Material and Methods: The study was axed on 40 total edentulous patients: 15 of upper jaw ($37.5 \pm 7.65\%$) and 25 – lower jaw ($62.5 \pm 7.65\%$); from which 16 women ($47.05 \pm 8.56\%$) and 18 men ($52.95 \pm 8.56\%$). Total edentulism of both jaws were recorded in 12 patients. The implant-prosthetic treatment was made by different superstructures. A total of 271 implants were inserted: 159 one piece ($58.7 \pm 2.99\%$) immediately loaded, 4 ($1.5 \pm 0.74\%$) two-piece immediately loaded and 108 ($39.8 \pm 2.97\%$) conventional loaded ones. The following prosthesis were made: 20 ($50.0 \pm 7.91\%$) fixed prosthesis, 7 ($17.5 \pm 6.01\%$) hybrid prosthesis, 11 ($20.0 \pm 6.32\%$) removable dentures supported on bars and 5 ($12.5 \pm 5.23\%$) with ball-attachment support (only in control group). The study group was consisted from 163 ($60.1 \pm 2.97\%$) implants immediately loaded, while the control group included 108 ($39.9 \pm 2.97\%$) conventionally loaded two-piece implants. During 10 years, failures and post-prosthetic complications which occurred at 107 ($39.48 \pm 2.97\%$) implants have been analyzed. In dependence on implant failure, two types of complications were distinguished: with implant loss – 14 (12 study and 2 control) implants, other complications – 93 (69 study and 24 control) implants. Statistical analysis was made by calculating percentages, standard error, Student's paired t test.

Results: The following causes of implant loss in the study group were determined: crown/implant ratio >1 – 2 ($14.28 \pm 9.35\%$), poor oral care – 6 ($42.86 \pm 13.23\%$), trauma with implants fractures – 2 ($14.28 \pm 9.35\%$), unknown – 2 ($14.28 \pm 9.35\%$). In the control group periimplantitis were determined in 2 ($14.28 \pm 9.35\%$) cases. Other complications which occurred in the study vs. control groups were: discementation – 24 ($2.8 \pm 4.54\%$ study) vs. 6 ($6.45 \pm 2.51\%$ control), ceramic layer dislocation – 25 ($26.88 \pm 4.60\%$ study) vs. 7 ($7.53 \pm 2.74\%$ control), mucositis – 7 ($7.53 \pm 2.74\%$ study) vs. 6 ($6.45 \pm 2.51\%$ control), threads exposure – 7 ($7.53 \pm 2.74\%$ study) vs. 2 ($2.15 \pm 1.50\%$ control), fracture of the superstructure – 0 (study) vs. 3 ($3.23 \pm 1.83\%$ control), abutment fracture – 6 ($6.4 \pm 2.51\%$ study).

Conclusions and Clinical Implications: Long term follow-up demonstrates the advantage of implant-prosthetic rehabilitation of patients with total edentulism using two-piece dental implants. During follow-up period, the frequency of complications ($21.46 \pm 2.49\%$ vs. $8.86 \pm 1.73\%$) as well as failures ($4.43 \pm 1.25\%$ vs. $0.7 \pm 0.51\%$) are bigger in the study group than in the study one ($P < 0.01$). Some of them are caused by the immediate loading of study group implants which had no secondary stability at that moment.